

MULTIPLE DEPEN.
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

CLAIM

SERIAL NO.
10 / 585715

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT			AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT					
	IND.		DEP.		IND.			IND.		DEP.		IND.		DEP.			
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TOTAL DEP.	25	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
TOTAL CLAIMS	26	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	